



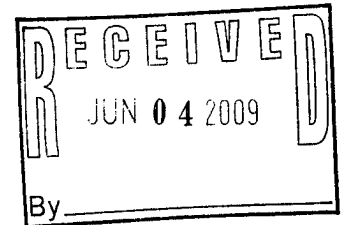
Environmental, Safety and Regulatory Compliance

Marathon Pipe Line LLC

539 South Main Street
Findlay, OH 45840
Telephone: (419) 421-3295

May 27, 2009

Vicki L Prather
Supervisor – Surface Water Permits Branch
Division of Water – KPDES Branch
200 Fair Oaks Lane
Frankfort, KY 40601



Re: Permit Renewal Application
KPDES Permit KY0093726

Dear Ms. Prather:

Please find enclosed the Marathon Pipe Line LLC (MPL) Permit Renewal Application and associated renewal application fee, for the KPDES Permit KY0093726.

The permit renewal application is for multiple outfalls at multiple facilities. The permit application does not contain sufficient room to provide information on all of the facilities and their associated outfalls. Therefore attachment "Supplement A" has been included to provide the information requested in the permit application in an organized and easy to read format.

Note that I have indicated in the Permit Application where "Supplement A" information is included.

Please feel free to contact me with questions or concerns at 419-421-3295.

Thomas A. Ross

ES&R Professional
Marathon Pipe Line LLC

/tar

Enclosures

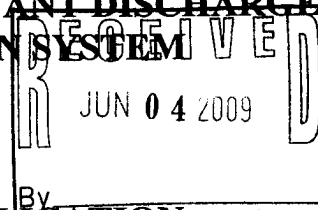
Cc: Kentucky NPDES Permit File

KPDES Form 1

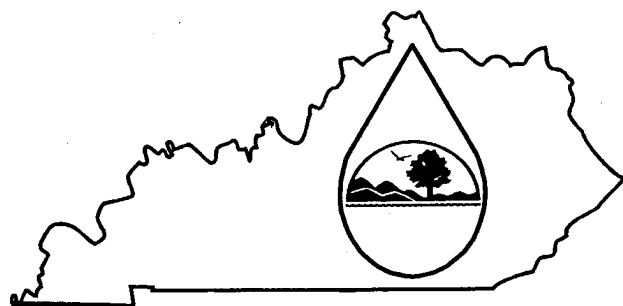
KPDES FORM 1

A14925

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM



PERMIT APPLICATION



This is an application to: (check one)

- ☐ Apply for a new permit.
☒ Apply for reissuance of expiring permit.
☐ Apply for a construction permit.
☐ Modify an existing permit.

Give reason for modification under Item II.A.

A complete application consists of this form and one of the following:

Form A, Form B, Form C, Form F, or Form SC

For additional information contact:

KPDES Branch (502) 564-3410

CK 1000-

I. FACILITY LOCATION AND CONTACT INFORMATION		AGENCY USE
A. Name of business, municipality, company, etc. requesting permit Marathon Pipeline LLC		0093726
B. Facility Name and Location	C. Primary Mailing Address (all facility correspondence will be sent to this address). Include owner mailing address on a separate sheet if different.	
Facility Location Name: Marathon Pipe Line LLC	Facility Contact Name and Title: Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> Thomas A. Ross	
Facility Location Address (i.e. street, road, etc., not PO Box): 539 South Main Street	Mailing Address: 539 South Main Street	
Facility Location City, State, Zip Code: Findlay, OH 45840	Mailing City, State, Zip Code: Findlay, OH 45840	
	Facility Contact Telephone Number: 419-421-3295	

II. FACILITY DESCRIPTION			
A. Provide a brief description of activities, products, etc: Transportation and storage of petroleum products, both crude and refined, via pipeline.			
B. Standard Industrial Classification (SIC) Code and Description			
Principal SIC Code & Description:	4612		
Other SIC Codes:	4613		

III. FACILITY LOCATION	
A. Attach a U.S. Geological Survey 7 1/2 minute quadrangle map for the site. (See instructions)	
B. County where facility is located: See attachment A	City where facility is located (if applicable): See attachment A
C. Body of water receiving discharge: See attachment A	
D. Facility Site Latitude (degrees, minutes, seconds): See attachment A	Facility Site Longitude (degrees, minutes, seconds): See attachment A
E. Method used to obtain latitude & longitude (see instructions): Topographic map coordinates	
F. Facility Dun and Bradstreet Number (DUNS #) (if applicable): 96-299-3101	

IV. OWNER/OPERATOR INFORMATION	
A. Type of Ownership: <input checked="" type="checkbox"/> Publicly Owned <input type="checkbox"/> Privately Owned <input type="checkbox"/> State Owned <input type="checkbox"/> Both Public and Private Owned <input type="checkbox"/> Federally owned	
B. Operator Contact Information (See instructions)	
Name of Treatment Plant Operator: N/A	Telephone Number:
Operator Mailing Address (Street):	
Operator Mailing Address (City, State, Zip Code):	
Is the operator also the owner? Yes <input type="checkbox"/> No <input type="checkbox"/>	Is the operator certified? If yes, list certification class and number below. Yes <input type="checkbox"/> No <input type="checkbox"/>
Certification Class:	Certification Number:

V. EXISTING ENVIRONMENTAL PERMITS		
Current NPDES Number: KY0093726	Issue Date of Current Permit: 11-1-2005	Expiration Date of Current Permit: 2-28-2010
Number of Times Permit Reissued: 4	Date of Original Permit Issuance: 1980??	Sludge Disposal Permit Number: N/A
Kentucky DOW Operational Permit #: N/A	Kentucky DSMRE Permit Number(s): N/A	

Which of the following additional environmental permit/registration categories will also apply to this facility?

CATEGORY	EXISTING PERMIT WITH NO.	PERMIT NEEDED WITH PLANNED APPLICATION DATE
Air Emission Source	See attachment A	
Solid or Special Waste		
Hazardous Waste - Registration or Permit		

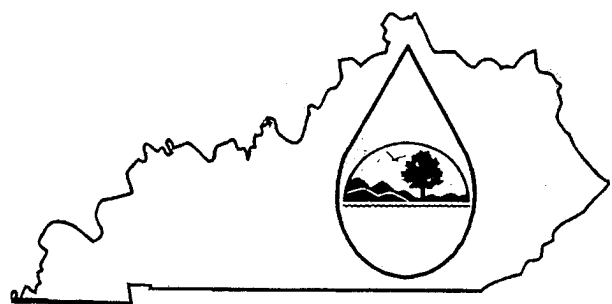
VI. DISCHARGE MONITORING REPORTS (DMRs)

KPDES permit holders are required to submit DMRs to the Division of Water on a regular schedule (as defined by the KPDES permit). Information in this section serves to specifically identify the name and telephone number of the DMR official and the DMR mailing address (if different from the primary mailing address in Section I.C).

A. DMR Official (i.e., the department, office or individual designated as responsible for submitting DMR forms to the Division of Water):	Thomas A. Ross - HES Professional
DMR Official Telephone Number:	419-421-3295

B. DMR Mailing Address:	
<ul style="list-style-type: none"> Address the Division of Water will use to mail DMR forms (if different from mailing address in Section I.C), or Contact address if another individual, company, laboratory, etc. completes DMRs for you; e.g., contract laboratory address. 	
DMR Mailing Name:	Same as section I.C.
DMR Mailing Address:	
DMR Mailing City, State, Zip Code:	

KPDES Form SC



KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

PERMIT APPLICATION

A complete application consists of this form and Form 1.
For additional information, contact: KPDES Branch, (502) 564-3410.

NAME OF FACILITY:											
I. FACILITY DISCHARGE FREQUENCY				AGENCY USE	0	0	9	3	7	2	6
A. Do discharge(s) occur all year? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (Complete Item IX for intermittent discharges.)											
B. How many days per week?				0.5 Times per week or 1/2 day per week.							
II. A. Give the basis of design for sizing of the wastewater facility (see instructions): No Treatment plant currently at any of the 4 NPDES Locations. Discharge rates are based on rainfall amounts.											
B. If new discharger, indicate anticipated discharge date:						N/A					
C. Indicate the design capacity of the treatment system:						MGD					

III. Outfall Location (see instructions)

Outfall (list)	LATITUDE			LONGITUDE			RECEIVING WATER (name)
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds	
001	37	46	37N	87	04	21N	unnamed tributary to yellow creek
002	37	46	37N	87	04	21N	unnamed tributary to yellow creek
005	37	51	47N	85	43	1W	Road Ditch
006	37	51	47N	85	43	1W	Road Ditch
007	38	5	24N	85	26	24W	Road Ditch
010	38	21	18N	82	36	48N	Unamed tributary to to Campbell Run
Method used to obtain latitude/longitude (i.e. GPS unit, USGS topographic map coordinates, etc.)				USGS Topographic Maps			

IV. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES (see instructions)

If wastewater other than domestic or sanitary is listed, complete page 4 in addition to page 1 and 2.

OUTFALL NO. (list)	OPERATION(S) CONTRIBUTING FLOW		TREATMENT	
	Operation (list)	Avg/Design Flow (include units)	List treatment components	List Codes from Table SC-1
	N/A			

V. Check the type(s) of wastewater discharged.

- ☐ Domestic (60% or more sanitary sewage)
 ☐ Oil field waste
☐ Noncontact cooling water
 ☒ Other (list): Contact Stormwater

VI. Does all water used at facility (except for human consumption) flow to a treatment plant? ☐ Yes ☒ No**VII. Discharge to other than surface waters. Check appropriate location:**

- ☐ Publicly-owned lake or impoundment Name of lake:
☒ Publicly-owned treatment works (POTW). Name of POTW: Owensboro Municipality
☐ Land application of Effluent
☐ Surface injection (Check term and identify on map) ☐ lateral field; ☐ sinkhole; ☐ sinking stream; ☐ deep well
☐ Closed Circuit (Check appropriate term) ☐ Holding tank; ☐ Mechanical evaporation; ☐ Waste impoundment

VIII. Check the metals present in the discharge if applicable and indicate the quantity discharged per year. (Indicate units).

NA

<input type="checkbox"/>	Antimony	
<input type="checkbox"/>	Arsenic	
<input type="checkbox"/>	Beryllium	
<input type="checkbox"/>	Cadmium	
<input type="checkbox"/>	Chromium	

<input type="checkbox"/>	Copper	
<input type="checkbox"/>	Lead	
<input type="checkbox"/>	Mercury	
<input type="checkbox"/>	Nickel	
<input type="checkbox"/>	Selenium	

<input type="checkbox"/>	Silver	
<input type="checkbox"/>	Thallium	
<input type="checkbox"/>	Zinc	
<input type="checkbox"/>		
<input type="checkbox"/>		

IX. INTERMITTENT DISCHARGES (Complete this section for intermittent discharges.)

A. Number of bypass points:	0	(If bypass points are indicated, information below must be completed for each bypass.)
-----------------------------	---	--

Check when bypass occurs:	<input type="checkbox"/> Wet Weather	<input type="checkbox"/> Dry Weather
Give the number of bypass incidents	N/A per year	per year
Give average duration of bypass	hours	hours
Give average volume per incident	1,000 gallons	1,000 gallons
Give reason why bypass occurs:		

B. Number of Overflow Points:	(If discharge is from an overflow point, the information below must be completed.)	
Check when overflow occurs:	<input type="checkbox"/> Wet Weather	<input type="checkbox"/> Dry Weather
Give the number of overflow incidents:	N/A per year	per year
Give average duration of overflow:	hours	hours
Give average volume per incident:	1,000 gallons	1,000 gallons

C. Number of seasonal discharge points	See Attachment A
Give the number of times discharge occurs per year	
Give the average volume per discharge occurrence	(1,000 gallons)
Give the average duration of each discharge	(days)
List month(s) when the discharge occurs	

X. AREA SERVED (see instructions)

NAME	ACTUAL POPULATION SERVED
N/A	
TOTAL POPULATION SERVED	

(PLEASE COMPLETE THIS PAGE IF OTHER THAN DOMESTIC WASTEWATER IS DISCHARGED)

XI. COOLING WATER ADDITIVES AND THEIR COMPOSITIONS

Additive	Composition	Concentration (mg/l)
N/A		

XII. EFFLUENT CHARACTERISTICS

See Attachment A


A. Indicate results of analysis for pollutants listed below.

POLLUTANT/PARAMETER	MAX DAILY VALUE	AVG DAILY VALUE	NUMBER OF SAMPLES
BOD ₅			
TOTAL SUSPENDED SOLIDS			
FECAL COLIFORM			
TOTAL RESIDUAL CHLORINE			
OIL AND GREASE			
CHEMICAL OXYGEN DEMAND			
TOTAL ORGANIC CARBON			
AMMONIA			
DISCHARGE FLOW			
PH			
TEMPERATURE (WINTER)			
TEMPERATURE (SUMMER)			

B. Frequency and duration of flow:

XIII. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print): John S. Swearingen - President Marathon Pipe Line LLC	TELEPHONE NUMBER (area code and number): 419-421-3295
SIGNATURE 	DATE 6/2/09

Attachment A

Attachment A – Permit Application

KPDES Permit No. - KY0093726

Supplemental information that was unable to be included in the permit application due to the limited space allotment.

KPDES Form 1:

I. None

II. None

III.

Section A – See attached USGS Maps

Section B.

Counties: Daviess,
Bullitt,
Jefferson,
Boyd

Cites: Owensboro KY
Lebanon Junction KY
Louisville, KY
Catlettsburg, KY

Section C:

1. 001 & 002 – Unnamed tributary of Yellow Creek, Daviess County
2. 005 & 006 – Unnamed Tributary of Crooked Creek – Bullitt County
3. 007 – Unnamed tributary of Northern Ditch – Jefferson County
4. 010 – Unnamed tributary of Campbell Run, Boyd County

Section D:

1. Owensboro (outfalls 001 & 002) – 37°, 46', 37" N by 87°, 04', 21" W
2. Lebanon Junction (outfalls 005 & 006) – 37°, 51', 47" N by 85°, 43", 1"W
3. UPS Jet Fuel (outfall 007) – 38°, 5", 24" N by 85°, 26', 24" W
4. Campbell Branch (outfall 010) – 38°, 21', 18" N by 82°, 36', 48" N

Section E – None

Section F - None

IV. None

Attachment A – Permit Application

KPDES Permit No. - KY0093726

V. C – Existing Environmental Permits:

Owensboro – Air Permit List

- a. Tank 713 – Permit S-97-055
- b. Tank 714 – Permit S-97-056
- c. Tank 719 – Permit S-97-057
- d. Tank 720 – Permit S-97-058

Owensboro – Hazardous Waste Registration

- a. KYD-985-085-018

Campbell Branch – Air Permit

- a. Permit S-96-230

Campbell Branch – Hazardous Waste Registration

- a. KY0-000-042-747

Lebanon Junction – Air

None

Lebanon Junction – Hazardous Waste Registration

- a. KYR-000-008-128

Louisville Jet Fuel – Air

- a. None

Louisville Jet Fuel – Hazardous Waste Registration

- a. None

VI. None

VII. None

VIII. None

KPDES Form SC:

I. None

II. None

III. None

IV. None

V. None

VI. None

VII. None

VIII. None

IX. Intermittent Discharges

A. None

B. None

C. Number of Seasonal Discharge Points

	001, 002	005,006	007	010
Number of disch/year	9 -12	9-12	7-10	2-4
Avg. volume per occurrence	0.612 MGD	0.0188 MGD	0.023 MGD	0.23 MGD
Average duration	2-3 days or 70+ hours	24 hours	24 hours	8 hours
Months of discharge	Jan, Feb, Mar, April, May, Sept Oct, Nov, Dec	Jan, Feb, Mar, April, May, Sept Oct, Nov, Dec	Jan, Feb, Mar, April, May, Sept Oct,	Mar, May,

X. None

XI. None

XII. Effluent Characteristics.

	001, 002		005, 006		007		010	
Pollutant	Max	Avg	Max	Avg	Max	Avg	Max	Avg
BOD 5 *	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TSS	65 mg/l	11mg/l	26 mg/l	10 mg/l	10 mg/l	4 mg/l	18 mg/l	7 mg/l
Fecals	0	0	0	0	0	0	0	0
Chlorine **	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01
Oil and Grease	0	0	0	0	0	0	0	0
COD *	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TOC	0	0	0	0	0	0	0	0
Ammonia *	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Discharge flow	0.612 MGD	0.612 MGD	0.086 MGD	0.025 MGD	0.086 MGD	0.025 MGD	0.33 MGD	0.18 MGD
pH	8.0 SU	8.9 SU	8.5 SU	7.3 SU	8.94 SU	7.2 SU	9.0 SU	7.6 SU
Temp – winter	40 deg F	40 deg F	40 deg F	40 deg F	40 deg F	40 deg F	40 deg F	40 deg F
Temp – Summer	68 deg F	68 deg F	68 deg F	68 deg F	68 deg F	68 deg F	68 deg F	68 deg F

* Sampling for this pollutant is not required as per the existing permit requirements. Based on historical sampling this pollutant is not believed to be an issue.

** Chlorine is only a factor during occasional hydrotest discharge. All hydrotest water discharges are filtered through Carbon to remove Chlorine and hydrocarbons.

XIII. None

Permit Application Fee

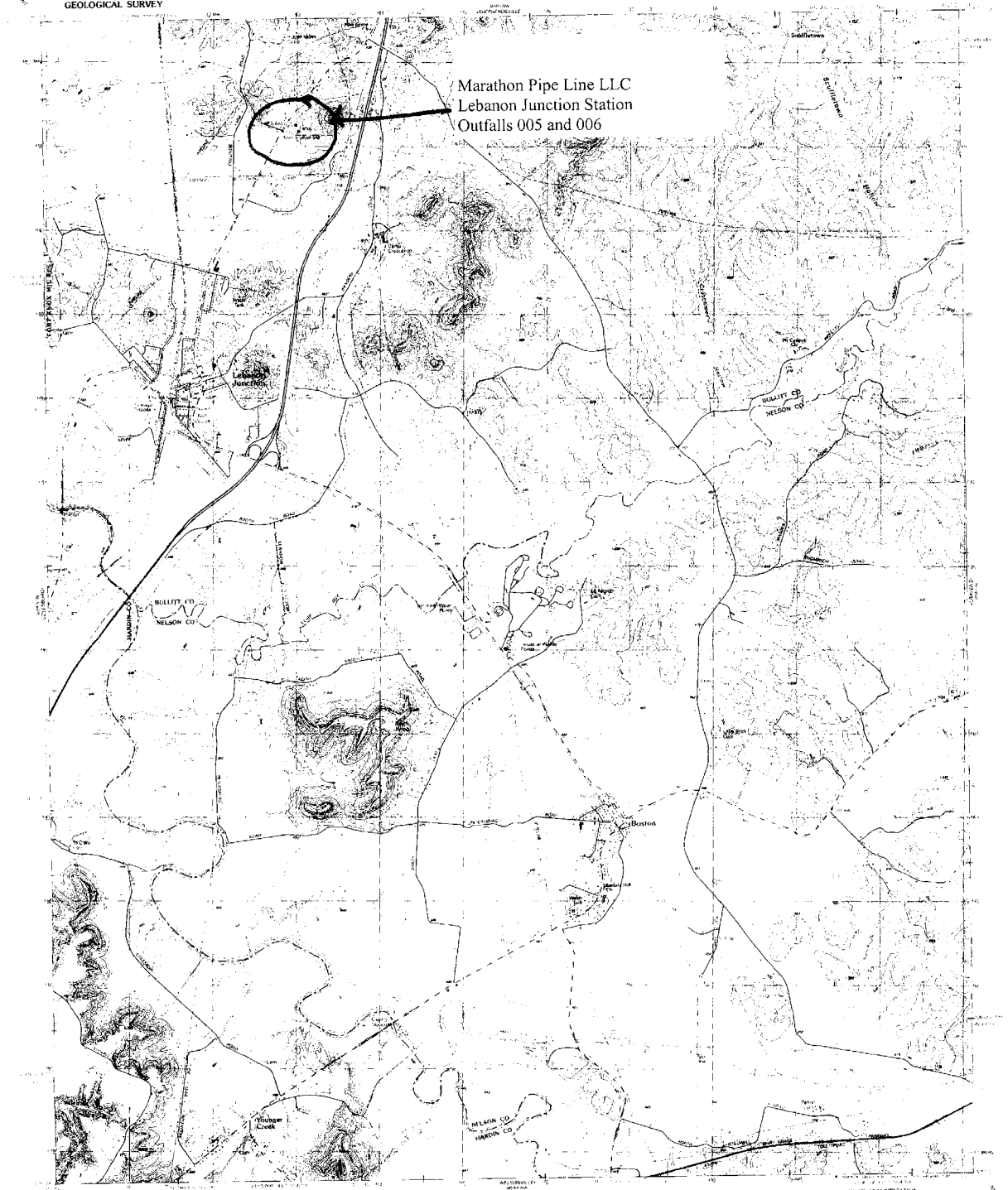
Topographic Information

Marathon Pipe Line LLC
Lebanon Junction Station
Outfalls 005 and 006

LEBANON JUNCTION QUADRANGLE
KENTUCKY
7.5 MINUTE SERIES (TOPOGRAPHIC)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Marathon Pipe Line LLC
Lebanon Junction Station
Outfalls 005 and 006



Produced by the United States Geological Survey
 Conducted by USGS and NGS/NMGS
 Geographic names printed photographically since 1987
 Field checked 1989. Map corrected 1991
 Project 1026. Kerties by Coordinate Systems, south zone
 (ambiguity resolved on map)
 1:10,000-scale quadrangle. Coordinates by coordinate
 system, south and north zones
 1000 feet on Universal Transverse Mercator grid, zone 16
 1927-28. North American Datum
 The difference between 1927 North American Datum and North
 American Datum of 1983 (NAD 83) for 1 minute of north-south
 geographic latitude is 1.17 feet. The NAD 83 is shown in
 dashed corner to corner
 There may be private encroachments within the boundaries of
 the National or State Natural Areas. These encroachments may
 have been disclosed from indicate aerial photo and field files where
 generally possible on aerial photographs. This information is unclassified

SCALE 1:24 000



CONTOUR INTERVAL 20 FEET
MAXIMUM GRADELINE VERTICAL ELEVATION OF 1275

ROAD CLASSIFICATION		
Primary highway, hard surface	—————	Light-duty road, hard or improved surface
Secondary highway, hard surface	- - - - -	Unimproved trail
Interstate Route	U.S. Route	State Route

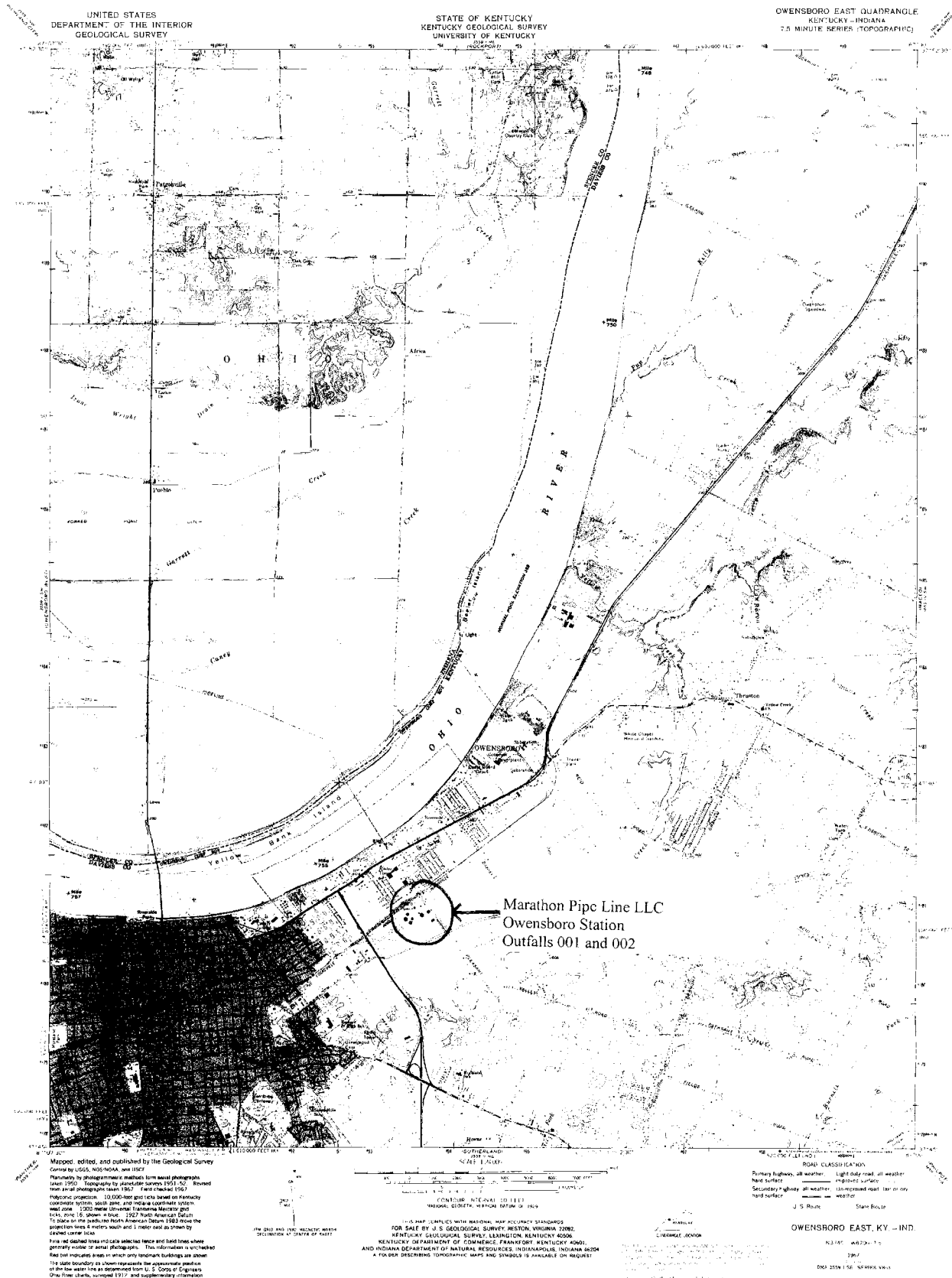
LEBANON JUNCTION, KY
26 N. MAIN STREET, 1ST FLOOR
37086-0610 404

1421

DOI: 10.1002/1522-2675(200109)23:09<1031::AID-MAG1031>3.0.CO;2-1

THIS MAP COMPLIES WITH NATIONAL MAP ACCURACY STANDARDS
FOR SALE BY U.S. GEOLOGICAL SURVEY, DENVER, COLORADO 80225, OR RESTON, VIRGINIA 22092
KENTUCKY GEOLOGICAL SURVEY, LEXINGTON, KENTUCKY 40506
AND KENTUCKY DEPARTMENT OF COMMERCE, FRANKFORT, KENTUCKY 40601
A FOLDER DESCRIBING TOPOGRAPHIC MAPS AND SYMBOLS IS AVAILABLE, ON REQUEST

Marathon Pipe Line LLC
Owensboro Station
Outfalls 001 and 002



**1:100 000-scale metric
topographic map**

**1:100 000-scale metric
topographic map**



30 X 60 MINUTE QUADRANGULAR SYMOMING

- Contours and elevations in meters
- Highways, roads and other manmade structures
- Water features
- Woodland areas
- Geographic names



Produced by the United States Geological Survey
 Completed from USGS 1:250,000-scale topographic maps
 dated 1954-1965. Municipality names were all
 photographed before 1970 and other names there
 received information not used here.
 Map dated 1986.

± DISTANCE INTERVAL 20 METERS
NATIONALLY, REFLECTING VERTICAL ORIENTED
POSITIONS SHOWN TO THE SCALE OF 10 METERS

THIS PAGE COVERS THE WITH NATIONAL AND ECONOMIC STRATEGIES

[illegible]

FOR SALE IN U.S. DOMESTIC MARKET. CONTACT
OUR SALES OFFICE.

Topographic Map Symbol

[illegible]

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

BURNAUGH QUADRANGLE
KENTUCKY WEST VIRGINIA
15 MINUTE SERIES (TOPOGRAPHIC)

Marathon Pipe Line LLC
Campbell Branch Station
Outfall 010

Map scale: 1 inch = 1 mile
Scale bar: 0 1 2 3 4 5 miles

Map title: Marathon Pipe Line LLC Campbell Branch Station Outfall 010

Map description: This is a topographic map of the Burnaugh Quadrangle, covering parts of Kentucky and West Virginia. The map shows the Marathon Pipe Line LLC Campbell Branch Station Outfall 010, which is marked with a red circle and an arrow. The map includes contour lines, roads, and geographical features. The map is titled 'Marathon Pipe Line LLC Campbell Branch Station Outfall 010'.